1040		rtment of the Treasury-Internal Revenue Serv S. Individual Income Ta		(99) I rn	202	1	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple	in this space.	
Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW) Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ►													
Your first name and middle initial Last n										Your social security number			
POORNA CHANDER REDDY MAI				PU				_		150-61-8681			
If joint return, spouse's first name and middle initial				name						Spouse's social security number			
NAIMISHA REDDY KOS				SNA						985-94-5555			
Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Presidential Election Can										on Campaign			
4622 LOWELL LANE								Check here if you, or your					
City, town, or post office. If you have a foreign address, also complete				e spaces below. State			е				spouse if filing jointly, want \$3 to go to this fund. Checking a		
DUBLIN							OH				box below will not change		
Foreign country name			F	Foreign province/state/c			ounty		Foreign postal code		your tax or refund.		
											You	Spouse	
At any time du	ring 20	21, did you receive, sell, exchange	, or other	wise dis	pose of any	fina	ncial interest i	n any	virtual currer	ncy?	Yes	X No	
Standard	Som	eone can claim: 🗌 You as a de	ependent	□ `	Your spouse	as a	a dependent						
Deduction	<u> </u>	Spouse itemizes on a separate retu	rn or you	were a c	dual-status a	alien							
Age/Blindness	S You:	Were born before January 2, 1	957] Are bli	nd Spo	use:	Was bor	n befo	ore January 2	2, 1957	🗌 ls bl	lind	
Dependents	s (see	instructions):		.,	ocial security		(3) Relationsh	ip	(4) 🖌 if qu	ualifies fo	r (see instru	ictions):	
If more	(1) Fi	rst name Last name		number			to you	to you Child tax cre		redit Credit for other dependents			
than four							_						
dependents, see instructions													
and check													
here 🕨 🔄													
	1	Wages, salaries, tips, etc. Attach	Form(s) V	V-2 .						. 1	1	07,428.	
Attach Sch. B if	2a	Tax-exempt interest	2a	!		b Taxable interest				. 2b			
required.	3a	Qualified dividends	3a	b O			Ordinary dividends .			. 3b			
	4a	IRA distributions	-	b Taxable amount					4b				
	5a		5a				axable amoun			. <u>5</u> b			
Standard	6a		6a			- P	axable amoun	t		. <mark>6</mark> b		_	
Deduction for- 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here													
Married filing				· · · ·	• •	· · ·	. 8		Ŭ.				
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9		07,428.	
 Married filing jointly or 	10	Adjustments to income from Schedule 1, line 26							. 10				
Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income								11	1	07,428.	
widow(er), \$25,100	12a	Standard deduction or itemized				'	12a	-	25,100				
 Head of household, 	b	Charitable contributions if you take the standard deduction (see instructions) 12b 500.). . 12 0			
\$18,800	c	Add lines 12a and 12b										25,600.	
 If you checked any box under 	13	Qualified business income deduction from Form 8995 or Form 8995-A								. 13			
Standard Deduction,	14	Add lines 12c and 13							. 14	_	25,600.		
see instructions.	15	Taxable income. Subtract line 14	trom line	e 11. lt z	ero or less, e	enter	r-U	• •		. 15		81,828.	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2021)

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Form 1040 (202	1)							Page Z	
	16	Tax (see instructions). Check if any from Form	n(s): 1 🗌 881	4 2 4972	3		16	9,499.	
	17	Amount from Schedule 2, line 3				🗋	17		
	18	Add lines 16 and 17				🗋	18	9,499.	
	19	Nonrefundable child tax credit or credit for	other depende	nts from Schedule	8812		19		
	20	Amount from Schedule 3, line 8							
	21	Add lines 19 and 20					21		
	22	Subtract line 21 from line 18. If zero or less,	enter -0				22	9,499.	
	23	Other taxes, including self-employment tax	, from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is your total tax					24	9,499.	
	25	Federal income tax withheld from:		1 E					
	а	Form(s) W-2			25 a 17,	886.			
	b	Form(s) 1099			25b				
	с	Other forms (see instructions)			25c	_			
	d	Add lines 25a through 25c				1	25d	17,886.	
If you have a	26	2021 estimated tax payments and amount a	applied from 20)20 return		🗋	26		
qualifying child,	27a	Earned income credit (EIC)			27a				
attach Sch. EIC.)	Check here if you were born after Jan				_			
		January 2, 2004, and you satisfy all the taxpayers who are at least age 18, to claim	the other requi	irements for		_			
	b	Nontaxable combat pay election				_			
	c	Prior year (2019) earned income			-	_			
	28	Refundable child tax credit or additional child		Schedule 8812	28				
	29								
	30	American opportunity credit from Form 8863, line 8 29 Recovery rebate credit. See instructions 30 1,400.							
	31	Amount from Schedule 3, line 15			31	.001			
	32			32	1,400.				
	33	Add lines 27a and 28 through 31. These are your total other payments and refundable credits Add lines 25d, 26, and 32. These are your total payments						19,286.	
	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid						9,787.	
Refund	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here						9,787.	
Direct deposit?	►b	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here . <t< th=""></t<>							
See instructions.		Account number 5 8 6 0 3 5 8							
	36	Amount of line 34 you want applied to your 2022 estimated tax 36							
Amount	37	Amount you owe. Subtract line 33 from line				. ►	37		
You Owe	38			• • • • • • •	38				
Third Party		you want to allow another person to dis						С	
Designee		tructions			Yes. Con	nplete bel	ow.	× No	
	De	Designee's		Phone Personal					
	nai	name 🕨		no. ► number					
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and								
Here		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which p						, 0	
more	Yo	ur signature	Date Your occupation					: you an Identity J, enter it here	
Joint return?				SOFTWARE DEVELOPER		(see ins	_		
See instructions.	Sp	Spouse's signature. If a joint return, both must sign.		Spouse's occupati	If the IF	IS sent	your spouse an		
Keep a copy for						-		ction PIN, enter it here	
your records.				HOMEMAKER		(see ins	t.) 🕨		
		one no. (832) 985-9060	Email address	CHNDMADUPU	GMAIL.COM				
Paid		parer's name Preparer's signa				PTIN		Check if:	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/12/2022 F	020827		Self-employed	
Use Only							10. (6	578)965-9522	
	Fir	n's address ► 2530 Pebble Creek 1	Ln Cummin	g GA 30041		Firm's I	EIN 🕨	30-1017196	
Go to www.irs.g	ov/Forn	1040 for instructions and the latest information.		BAA	REV 01/04/22 PRO			Form 1040 (2021)	

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